APPLICATION DATA SHEET

Electronic Version v14

Stylesheet Version v14.0

Title of Invention

OPTICAL MICRO PLUGS FOR MULTICHANNEL AND MULTILAYER PHARMACEUTICAL DEVICE

Application Type: regular, utility

Attorney Docket Number: FIS920040062US1

Correspondence address:

Customer Number: 29505

Inventors Information:

Inventor 1:

Applicant Authority Type: Inventor **Citizenship:** US

Given Name: Govindarajan Family Name: Natarajan

Residence:

City of Residence: Poughkeepsie

State of Residence: NY
Country of Residence: US

Address-1 of Mailing Address: 32 Regency Drive

Address-2 of Mailing Address:

City of Mailing Address: Poughkeepsie

State of Mailing Address: NY
Postal Code of Mailing Address: 12603
Country of Mailing Address: US

Phone: Fax:

E-mail:

Inventor 2:

Applicant Authority Type:InventorCitizenship:USGiven Name:DavidMiddle Name:H.

Family Name: Gabriels

Residence:			
City of Residence:	Cold Spring		
State of Residence:	NY		
Country of Residence:	US		
Address-1 of Mailing Address:	3 Marion Avenue		
Address-2 of Mailing Address:			
City of Mailing Address:	Cold Spring		
State of Mailing Address:	NY		
Postal Code of Mailing Address:	10516		
Country of Mailing Address:	US		
Phone:			
Fax:			
E-mail:			
Inventor 3:			
Applicant Authority Type:	Inventor		
Citizenship:	US		
Given Name:	Mark		
Middle Name:	W.		
Family Name:	Kapfhammer		
Residence:			
City of Residence:	Poughkeepsie		
State of Residence:	NY		
Country of Residence:	US		
Address-1 of Mailing Address:	120 Wennington Drive		
Address-2 of Mailing Address:			
City of Mailing Address:	Poughkeepsie		
State of Mailing Address:	NY		
Postal Code of Mailing Address:	12603		
Country of Mailing Address:	US		
Phone:			
Fax:			
E-mail:			
Inventor 4:			
Applicant Authority Type:	Inventor		
Citizenship:	US		
Given Name:	Richard		
Middle Name:	A.		
Family Name:	Shelleman		
Residence:			
City of Residence:	Poughkeepsie		

State of Residence: NY **Country of Residence:** US 62 David Drive Address-1 of Mailing Address: Address-2 of Mailing Address: City of Mailing Address: Poughkeepsie NY State of Mailing Address: 12601 **Postal Code of Mailing Address:** US **Country of Mailing Address:** Phone: Fax: E-mail: Inventor 5: **Applicant Authority Type:** Inventor Citizenship: US Given Name: Kurt Middle Name: A. **Family Name:** Smith Residence: City of Residence: Poughkeepsie State of Residence: NY US **Country of Residence:** 6 Silver Lane Address-1 of Mailing Address: Address-2 of Mailing Address: City of Mailing Address: Poughkeepsie State of Mailing Address: NY Postal Code of Mailing Address: 12603 **Country of Mailing Address:** US Phone: Fax: E-mail:

Assignee 1:

Organization Name: International Business Machines Corporation

Address-1 of Mailing Address: New Orchard Road

Address-2 of Mailing Address:

City of Mailing Address:

State of Mailing Address:

NY

Postal Code of Mailing Address:

Country of Mailing Address:

US

Phone:

Fax:			
E-mail	:		